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Sample Form (03-04)

AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY

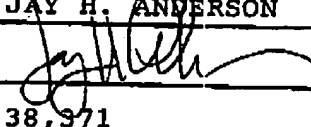
In re Application of:
JEFFREY GAMBINO, ET AL.Application No.
10/604,026Filed:
6/23/03Title:
DUAL DAMASCENE INTERCONNECT STRUCTURES HAVING DIFFERENT
MATERIALS FOR LINE AND VIA CONDUCTORSAttorney Docket No.
FIS920030130US1Art Unit:
2811

The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:

Name	Registration Number
LISA J. ULRICH	45,168

This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.

SIGNATURE of Practitioner of Record

Name	JAY H. ANDERSON		
Signature		Date	28 March 2005
Registration Number	38,371	Telephone	845-894-3667

This form offers a sample or suggested format for an authorization of a practitioner who is not of record. See MPEP § 713.05 for more information. This sample form is not an OMB officially approved form.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

CERTIFICATION OF FACSIMILE TRANSMISSION:

I hereby certify that this correspondence is being facsimile transmitted to the USPTO on the date shown below:

Date of Transmission: 3/29/05
Name of Person Linda Roberts-Jackson
Making Transmission:

Signature: 